

PERSONALITY (201) FILE REQUEST									
TO RI/ANALYSIS SECTION				DATE 30 Sept 1958		ACTION <input type="checkbox"/> OPEN <input checked="" type="checkbox"/> AMEND <input type="checkbox"/> CLOSE			
FROM []				ROOM NO. 2203-K		TELEPHONE 3915			
INSTRUCTIONS: Form must be typed or printed in block letters.									
SECTION I: List 201 number, name and identifying data in the spaces provided. All known aliases and variants (including maiden name, if applicable) must be listed. If the identifying data varies with the alias used, a separate form must be used. Write UNKNOWN for items you are unable to complete.									
SECTION II: List cryptonym or pseudonym, if assigned. If true name is sensitive, obtain 201 number from 201 Control Desk and complete Section I and Section III. On a separate form, enter the 201 number and complete Section II and Section III. Submit each form separately.									
SECTION III: To be completed in all cases.									
SECTION I									
<input type="checkbox"/> SENSITIVE <input checked="" type="checkbox"/> NONSENSITIVE		1. SOURCE DOCUMENT							
NAME (Last)		NAME (First)		NAME (Middle)		NAME (Title)			
WOLFF		Karl		Friedrich Otto					
TYPE NAME 2.		NAME VARIANTS							
(Last)		(First)		(Middle)		(Title)			
SECTION II									
PHOTO 4.		BIRTH DATE 5.		COUNTRY OF BIRTH 6.		CITY OR TOWN OF BIRTH 7.		OTHER IDENTIFICATION 8.	
YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		13 05 00		GERM		DARMSTADT		1. 2. 3.	
OCCUPATION/POSITION								OCC/POS CODE 9.	
Former SS General; presently Advertising Representative								Busm	
SECTION III									
COUNTRY OF RESIDENCE 10.		ACTION DESK 11.		SECOND COUNTRY INTEREST 12.		THIRD COUNTRY INTEREST 12a.			
WGERM		EE/G/W5							
COMMENTS: Former SS General's Changing Case file title									
CS COPY									
PERMANENT CHARGE		RESTRICTED FILE		SIGNATURE					
YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>							

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